

## Division of Health Care Facilities

PRINTED: 08/20/2015  
FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  TN7201	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING 01  B. WING _____	(X3) DATE SURVEY COMPLETED  08/19/2015
NAME OF PROVIDER OR SUPPLIER  LAURELBROOK SANITARIUM		STREET ADDRESS, CITY, STATE, ZIP CODE 114 CAMPUS DRIVE DAYTON, TN 37324		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N1410	<p>1200-8-6-.14(2)(a)5.(ii) Disaster Preparedness</p> <p>(2) Physical Facility and Community Emergency Plans.</p> <p>(a) Physical Facility (Internal Situations).</p> <p>5. Each of the following disaster preparedness plans shall be conducted annually prior to the month listed in the plan. Drills are for the purpose of educating staff, resource determination, testing personnel safety provisions and communications with other facilities and community agencies. Records which document and evaluate these drills must be maintained for at least three (3) years.</p> <p>(ii) External disaster procedures plan (for tornado, flood, earthquake), to be exercised prior to March, shall include:</p> <p>(i) Staff duties by department and job assignment; and,</p> <p>(ii) Evacuation procedures.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to exercise tornado and earthquake drills annually. The findings include: Record review and interview with the Maintenance Director on 8/19/2015 at 10:15 AM confirmed the facility failed to perform a tornado and earthquake drills in the 2014 and 2015. This finding was verified by the Maintenance Supervisor and acknowledged by the Administrator during the exit conference on 8/19/2015.</p>	N1410	<p>1. On 08/26/15 the Maintenance Director conducted a tornado drill and on 08/27/15 an earthquake drill was conducted.</p> <p>2. On 8/26/15 Maintenance Director placed annual tornado, earthquake, and bomb threat training on calendar for next year to be done in Jan, Feb, Mar.</p> <p>3. Beginning 8/26/15 the Maintenance Director will bring training schedule and calendar to quarterly QAPI meetings.</p> <p>4. Beginning 08/26/15 Maintenance Director will report disaster drills conducted to QAPI and the administrator will report to governing board.</p>	8/26/15

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X8) DATE

STATE FORM

FXQD21

If continuation sheet 1 of 3

## Division of Health Care Facilities

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  TN7201	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING 01  B. WING _____		(X3) DATE SURVEY COMPLETED  08/19/2015
NAME OF PROVIDER OR SUPPLIER  LAURELBROOK SANITARIUM		STREET ADDRESS, CITY, STATE, ZIP CODE 114 CAMPUS DRIVE DAYTON, TN 37321			
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N1411	Continued From page 1	N1411			
N1411	1200-8-6-.14(2)(a)5.(iii) Disaster Preparedness  (2) Physical Facility and Community Emergency Plans.  (a) Physical Facility (Internal Situations).  5. Each of the following disaster preparedness plans shall be conducted annually prior to the month listed in the plan. Drills are for the purpose of educating staff, resource determination, testing personnel safety provisions and communications with other facilities and community agencies. Records which document and evaluate these drills must be maintained for at least three (3) years.  (iii) Bomb Threat Procedures Plan, to be exercised at any time during the year:  (I) Staff duties by department and job assignment; and,  (II) Search team, searching the premises.  This Rule is not met as evidenced by: Based on record review and interview, the facility failed to exercise a bomb threat drill annually. The findings include: Interview and record review with the Administrator on 8/19/2015 at 10:15 AM confirmed the facility failed to perform a bomb threat drill in the past year. There was no documentation to indicate a bomb threat drill or in-service training was conducted in the past. This finding was verified by the Maintenance Supervisor and acknowledged by the Administrator during the exit conference on	N1411 N1411	1. On 08/25/15 the Maintenance Director conducted a bomb threat in- service.  2. On 8/26/15 Maintenance Director placed annual tornado, earthquake, and bomb threat training on calendar for next year to be done in Jan, Feb, Mar.  3. Beginning 8/26/15 the Maintenance Director will bring training schedule and calendar to quarterly QAPI meetings.  4. Beginning 08/26/15 Maintenance Director will report disaster drills conducted to QAPI and the administrator will report to governing board.	8/26/15	

From:

09/24/2015 12:16

#336 P.016/016

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N1411	Continued From page 2 8/19/2015.	N1411			

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STATE FORM

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FXQD21

If continuation sheet 3 of 3